E UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Kenji Masaki et al.

Group Art Unit: 2624

Application No.: 09/880,964

Examiner: Lucas Divine

Filing Date:

June 15, 2001

Confirmation No.: 5968

Title: APPARATUS AND METHOD FOR IMAGE PROCESSING AND PRINT SYSTEM

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:							
Enc	losed is a reply for the above-identified patent application.						
	A Petition for Extension of Time is also enclosed.						
	Terminal Disclaimer(s) and the \$\infty\$\$ \$65.00 (2814) \$\infty\$\$ \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.						
Also enclosed is/are							
	Small entity status is hereby claimed.						
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$395.00 (2801) ☐ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).						
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.						
	Applicant(s) previously submitted						
	on, for which continued examination is requested.						
	Applicant(s) requests suspension of action by the Office until at least which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.						
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.						

Attorney Docket No. 018775-832
Application No. 09/880,964

No additional claim fee is required.	

\boxtimes	An additional	claim fee i	s required,	and is calculated	d as shown below.
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AMENDED CLAIMS									
	No. of Claims	Highe: of Cla Previo	aims ously	•	Extra Claims		Ra	te	Additional Fee
Total Claims	12	MINUS	20	=	0	×	\$50.00	(1202) =	\$ 0.00
Independent Claims	6	MINUS	4	=	2	×	\$200.00	(1201) =	\$ 400.00
If Amendment adds m	nultiple depen	dent claim	s, ad	d \$	360.00 (1203)				
Fotal Claim Amendment Fee \$400.						\$ 400.00			
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee \$					\$ 0.00				
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT						\$ 400.00			

	A check	in the amount o	of is enclosed for the fee due.
X	Charge _	\$ 40.00	to Deposit Account No. 02-4800.
	Charge		to credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Date: April 20, 2005

Ву

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Registration No. 40,116



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AMENDMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated January 26, 2005, please amend the above-identified patent application as follows:

04/21/2005 SZEWDIE1 00000086 024800 09880964

01 FC:1201

400.00 DA